

# PART ORDER FORM

SHIP TO:

Order Date \_\_\_\_\_ Time \_\_\_\_\_

Ordered By \_\_\_\_\_

Telephone \_\_\_\_\_

Warranty \_\_\_ Yes \_\_\_ No Quote # Q \_\_\_\_\_

P.O. #:

INVOICE TO:

SHIPPING INFORMATION			PAYMENT	
<input type="checkbox"/> UPS NEXT DAY	<input type="checkbox"/> AIR FREIGHT	<input type="checkbox"/> DHL	<input type="checkbox"/> COLLECT	<input type="checkbox"/> TBC
<input type="checkbox"/> UPS 2nd DAY	<input type="checkbox"/> FED EX	<input type="checkbox"/> TRUCK	<input type="checkbox"/> PREPAID	<input type="checkbox"/> COD
<input type="checkbox"/> UPS GROUND	<input type="checkbox"/> OTHER _____			<input type="checkbox"/> TBA

SERIAL #:

MODEL:

QTY	PART NO.	DESCRIPTION	PRICE (EA)	TOTAL

COMMENTS: (Machine is down? \_\_\_ Yes \_\_\_ No Reoccurring issue? \_\_\_ Yes \_\_\_ No)

Please verify that ORANGE and WHITE BILINGUAL SAFETY LABELS are on the machine.

YES (VERIFIED BY) \_\_\_\_\_ NO \_\_\_ NOT SURE \_\_\_

Please verify that all SAFETY GUARDS are on the machine

YES (VERIFIED BY) \_\_\_\_\_ NO \_\_\_ NOT SURE \_\_\_

## CHICAGO®

